INSTRUCTIONS FOR COMPLETING THIS FORM:

You cannot electronically save any of the additions you make to this form. In other words, after you complete this form on your computer, it can not be saved with your information. We recommend that before typing your responses online, you print two blank copies and complete one by hand. When you're sure all the answers are complete, open the application file again and enter your responses on the form, then immediately print it, sign it and date it. Make a copy for your files before mailing your application materials.

WARNING: If an applicant is unable to complete or print an online form, he or she is NOT relieved of the requirement to meet the final filing date requirement. WE STRONGLY URGE ALL CANDIDATES PLANNING TO USE THE WEBSITE FORMS TO COMPLETE THEIR ONLINE "TYPING" AT LEAST TWO WEEKS BEFORE THE FINAL FILING DATE. We also strongly recommend that you print one or two extra blank forms in case computer or printer problems force you to use a typewriter to meet the filing deadline. The Board is not responsible for any failure by an applicant to meet filing deadlines.

To Fill Out the Form:

- Use MM/DD/YY format for all dates EXCEPT the degree date; use MM/YY for the degree date.

- Use standard abbreviations where possible (i.e. Sr for Senior, Mgr. for manager, St for Street, CA for California, etc.) **If all of the characters you have typed do not show up on the form, the missing characters will not print. Go back and shorten or abbreviate your answer to fit**. Font size cannot be changed in Acrobat Reader.

- Use the magnifying glass to increase (click once) or decrease (control+click) your view of the form

- Select the "hand" tool. Move the hand over the first blank on the form. The hand will turn into an "I-beam" cursor.

- Type the requested information. Press Tab to accept the change and to go to the next field.

- For check boxes, the hand will become an arrow. Click cursor to mark box.

- Press shift+tab to go to the previous field.

- Pressing Tab, Return, or Enter will accept the entry you've made and enter it on the form. **If you do not press tab, return, or enter, the information you entered will not be accepted and will not print out.**

- Once you have completed the form, print it, sign it, and make a photocopy for your files.

- When you mail the form, please do not include this page of instructions.

BOARD FOR PROFESSIONAL ENGINEERS AND LAND SURVEYORS
2535 Capitol Oaks Drive, Suite 300
Sacramento, CA 95833-2944
(916) 263-2222 fax: (916) 263-2246
www.dca.ca.gov/pels

APPLICATION FOR LICENSE AS A PROFESSIONAL ENGINEER

FEE: $275.00   (Remit by Check or Money Order Only)

ENGINEERING BRANCH: _____

<table>
<tr><td colspan="2"><i>For Office Use Only - Online</i></td></tr>
<tr><td><i>Receipt</i> _____</td></tr>
<tr><td><i>Received</i> _____</td></tr>
<tr><td><i>ID No.</i> _____</td></tr>
<tr><td>Cert No. _____</td></tr>
</table>

☐ Application for Comity   ☐ I will be submitting a Council Record   ☐ Application for Examination on: _____
                                                                                                                         Month/Year

☐ Application for Reinstatement   ☐ I will not be submitting a Council Record   Final Filing Date for Examination: _____
                                                                                                                         Date

Type your name exactly as you want it to appear on your wall certificate.   Please note: The names and addresses of Board licensees are public records and are published in both electronic and print media, as well as disclosed upon request to the Board. You may use a home address, a post office box, or a business address.

1. Last Name	First	Middle		2. Social Security No
3. Street Address	City	State	Zip Code	Country

Birthdate: For ID Purposes Only   5. Phone, with Area Code and Extension

4. Month/Day/Year of Birth: /   /   Home: Business:

6. If you have passed an engineering-in-training written examination, give the following information:

State: Certificate No. (if applicable):   Date of exam: Waiver Requested ☐

7. List branches of engineering in which you hold a valid license as a professional engineer obtained by written examination, or by comity. Indicate total length of the written examination such as 2-hour, 8-hour, or 16-hour.

STATE	BRANCH	EXAM DATE	CERTIFICATE NO.	EXPIRATION DATE	EXAM DURATION (hours)

8. Education. University and Graduate Studies (Certified sealed transcripts only) (Foreign transcripts may not be sealed but must be translated into English.)

NAME AND LOCATION OF INSTITUTION	ATTENDANCE FROM (mo/yr) TO	COURSE CE, ME, EE, etc.	DATE OF DEGREE	TYPE OF DEGREE

9. HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE, MISDEMEANOR OR ENTERED A PLEA OF NOLO CONTENDERE OTHER THAN FOR A MINOR TRAFFIC OFFENSE? IF YES. EXPLAIN UNDER REMARKS ON REVERSE SIDE. CONVICTIONS DISMISSED UNDER PENAL CODE SECTION 1203.4 MUST BE DISCLOSED.   ☐ YES   ☐ NO

10. HAVE YOU EVER HAD LICENSURE DENIED, DISCIPLINED, SUSPENDED, OR REVOKED IN ANY STATE (OTHER THAN FOR LACK OF MINIMUM QUALIFICATION OR FAILURE OF EXAMINATION)?   ☐ YES   ☐ NO
If YES, explain fully on reverse side

11. HAVE YOU EVER FILED ANOTHER APPLICATION FOR LICENSURE AS A PROFESSIONAL ENGINEER WITH THIS BOARD?   ☐ YES   ☐ NO

BRANCH: DATE:

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE INFORMATION ON THIS APPLICATION AS WELL AS ANY OTHER DOCUMENTS SUBMITTED IN SUPPORT OF THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature of
NOTE: IT IS THE APPLICANT'S RESPONSIBILITY TO SUBMIT   Applicant _____
A COMPLETE APPLICATION PACKET

Optional: e-mail address_____ Date_____Year_____

USE TYPEWRITER OR FILL OUT FORM ONLINE, PRINT AND SIGN THIS APPLICATION

12. ENGAGEMENT SUMMARY AND REFERENCES FOR _____ , _____ SS# _____

List your engagements below in reverse chronological order. Leave no gaps in the record. Your present engagement is No. 1. An engagement is one association, with one employer, in one capacity, at one level of responsibility. A change in engagement is a promotion, a new employer, or a significant change in duties, authority, responsibility, etc. DIFFERENT PROJECTS IN THE SAME CAPACITY FOR ONE EMPLOYER ARE NOT CONSIDERED SEPARATE ENGAGEMENTS.

For each engagement claimed as qualifying experience, list the name of a person who will serve as a reference. These individuals should be licensed as Professional Engineers in the discipline for which you are applying. YOU MUST LIST AT LEAST FOUR PERSONS WILLING TO SERVE AS REFERENCES FOR YOU.

ENGAGE-MENT NUMBER	FROM (mo/day/yr) TO (mo/day/yr)	Employer	Name of Reference	Reference's License No/State
	Months of Qual. Experience**	Applicant's Job Title	Professional Relationship	Branch
1				
	MONTHS**			
	MONTHS**			
	MONTHS**			
	MONTHS**			
	MONTHS**			
	MONTHS**			
	MONTHS**			
	MONTHS**			
	MONTHS**			

13. REMARKS: Use this space for amplifying remarks, and for replies to questions above or on Page 1.

NOTE: Qualifying experience does not include student trainee, orientation, technician or non-engineering work, and cannot overlap with credit claimed for education.

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